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2014 FEB 25 PM 12:18
FEC MAIL CENTER

Committee Name:

UNITAS, Inc.

If registered, FEC ID:

Today's Date:

2/20/14

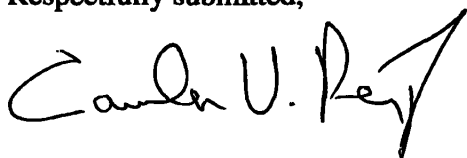
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,



Treasurer's Name:

Carlos V. Perez

, Treasurer

14031190985

FEC
FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

UNITAS, INC.

ADDRESS (number and street)

PO BOX 366441

◀ (Check if address
is changed)

SAN JUAN

CITY ▲

PR

STATE ▲

00936

ZIP CODE ▲

6441

COMMITTEE'S E-MAIL ADDRESS

◀ (Check if address
is changed)

cyperez@groupcyp.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

◀ (Check if address
is changed)

2. DATE

02 / 20 / 2014

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

X

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

CARLOS V. PEREZ

Signature of Treasurer

Carlos V. Perez

Date

02 / 20 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

14031190987

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

CARLOS V. PEREZ

Mailing Address

PO BOX 366441

SAN JUAN

PR

00936-6441

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

787-461-4440

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

CARLOS V. PEREZ

Mailing Address

PO BOX 366441

SAN JUAN

PR

00936-6441

Title or Position

CITY

STATE

ZIP CODE

CUSTODIAN AND TREASURER

Telephone number

787-461-4440

14031190988

Full Name of
Designated
Agent

LILMARIE FERER

Mailing Address

PO BOX 366441

SAN JUAN

CITY

PR

STATE

00936-6441

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

ORIENTAL BANK

Mailing Address

PO BOX 364745

SAN JUAN

CITY

PR

STATE

00936-4745

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031190989

14031190990

Carlos V. Pérez
PO Box 366441
San Juan, PR

00936-6441

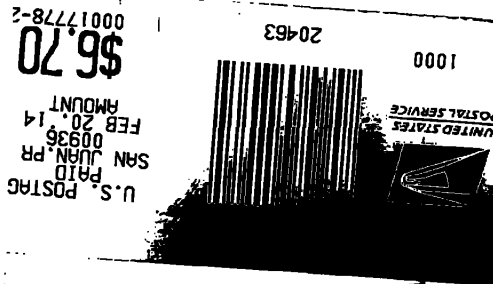
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N.W. Washington, DC



20463



Federal Election Commission
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The FEC added this page to the end of this filing to indicate how it was received.

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Date of Receipt

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USPS First Class Mail

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Postmarked (R/C)

2/20/14

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USPS Priority Mail

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USPS Priority Mail Express

Postmarked

☐

Postmark Illegible

☐

No Postmark

☐

Overnight Delivery Service (Specify):

Shipping Date

Next Business Day Delivery

☐☐

Received from House Records & Registration Office

Date of Receipt

☐

Received from Senate Public Records Office

Date of Receipt

☐

Received from Electronic Filing Office

Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked

ES

PREPARER

(8/2013)

2/25/14

DATE PREPARED

14031190991